Allergy & Asthma Network News

July Webinar: Coordinating Allergy Care Through the Lifespan
Dr. Kelly Maples
July 23 – 4:00 PM Eastern

Want more information on the coronavirus?
Visit our COVID-19 Information Center – look for the red bar on our home page

Do you have asthma? Know someone who does?
Join our Asthma360º Patient Research Registry

More information at allergyasthmanetwork.org

COVID-19 & Asthma: The Time for Equity in Healthcare is NOW

Dr. LeRoy Graham
Dr. Purvi Parikh
Tonya Winders
Our Speakers

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National Spokesperson, Allergy & Asthma Network

Tonya Winders  
President & CEO, Allergy & Asthma Network  
President, Global Allergy & Airways Patient Platform

Outline

- Current State of COVID-19
- History of Asthma Disparities in the US
- COVID-19: Magnifying Disparities in Care
- Where Do We Go From Here?
Current State of COVID-19

Tonya Winders
**US Data Report**

<table>
<thead>
<tr>
<th>Total Confirmed Cases</th>
<th>2,302,288</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total New Cases</td>
<td>26,643</td>
</tr>
<tr>
<td>Total Deaths</td>
<td>120,333</td>
</tr>
<tr>
<td>Total New Deaths</td>
<td>410</td>
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*Data as of 6/24/20*

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**In the News**

- **NY Times:** Churches serving communities of color have been transformed overnight into mini-clinics offering free coronavirus tests to all comers. The initiative, a partnership of the churches, Gov. Andrew M. Cuomo’s office and Northwell Health, is an effort to expand testing among black and Hispanic citizens, who have been disproportionately affected by the pandemic.

- **WHO:** Dexamethasone, a corticosteroid, can be lifesaving for patients who are critically ill with COVID-19.
  - For patients on ventilators, the treatment was shown to reduce mortality by about one third, and for patients requiring only oxygen, mortality was cut by about one fifth, according to preliminary findings.
In the News

- While most states have decreased in COVID-19 cases, 3 states have become “hot spots”
  - Florida, Arizona, Texas
  - Dr. Fauci cites “disturbing surge”
  - Cases are “spotty”
  - Should be expected with reopening
- NY, NJ, & CT governors announced today that visitors coming from “hot spots” must quarantine for 14 days
  - 9 states meet threshold of 10 out of every 100,00 people testing positive to qualify for quarantine
  - Alabama, Arkansas, Arizona, Florida, North Carolina, South Carolina, Washington, Utah and Texas

COVID-19 Cases in US by Date Reported
COVID-19 Information Center – Allergy & Asthma Network

- [https://allergyasthmanetwork.org/health-a-z/covid-19/](https://allergyasthmanetwork.org/health-a-z/covid-19/)
- Webinar recordings
- Patient program with ATS recording
- Infographics
- Fact Sheets and Q & A's
- Managing Pediatric Asthma during COVID-19
- What coronavirus looks like
- State by State guidance on reopening

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History of Asthma Disparities in the US

Dr. Purvi Parikh
What does “disparity” mean?

• Health disparities are racial or ethnic differences in the quality of healthcare that are not due to access-related factors or clinical needs, preferences, and appropriateness of intervention.

What does "health equity" mean?

• The attainment of the highest level of health for ALL people. Achieving health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health and health care disparities.

Health Equity is the Goal

Getting there is the part we need to do better.
Social Determinants of Health

Social determinants of health are conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. Resources that enhance quality of life can have a significant influence on population health outcomes. Examples:

- Safe and affordable housing
- Access to education
- Public safety
- Availability of healthy foods
- Local emergency/health services
- Environments free of life-threatening toxins

Health Disparities

- Exist across the spectrum of all chronic health conditions
- Very apparent in asthma care
- It is not acceptable
- Time for change

Asthma Health Disparities

Asthma crosses all racial, ethnic and socioeconomic groups. It is more common among African-American, Hispanic and Native American populations, particularly those living in poor urban areas.

<table>
<thead>
<tr>
<th>Rate of Asthma-Related ER Visits and Deaths Compared with Caucasians</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td>African-American children:</td>
</tr>
<tr>
<td>African-American adults:</td>
</tr>
<tr>
<td>Hispanic children:</td>
</tr>
</tbody>
</table>
Asthma

Factors in Disparities

“Over the years, efforts to eliminate disparities and achieve health equity have focused primarily on diseases or illnesses and on health care services. However, the absence of disease does not automatically equate to good health.”

-Healthy People.gov
Food Allergy Disparities

- Disparities exist in the economic impact of food allergy based on socioeconomic status.
- Affordable access to specialty care, medications, and allergen-free foods are critical to keep all food-allergic children safe, regardless of income and race.

What can lead to disparities in food allergies?

<table>
<thead>
<tr>
<th>Cost of epinephrine auto-injectors</th>
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</thead>
<tbody>
<tr>
<td>Direct medical costs</td>
</tr>
<tr>
<td>Lack of insurance</td>
</tr>
<tr>
<td>Lack of access to allergen-free foods</td>
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How Do We Get From Here to There?

Disparity to Equity
COVID-19: Magnifying Disparities in Care

Dr. LeRoy Graham

Taking a short detour to COVID-19

Within the United States, limited emerging data reveal that Hispanic and African Americans residing in the urban cores of many large U.S. cities appear to account for an alarmingly disparate proportion of both cases and deaths relative to their respective populations in these heavily populated urban centers.
Data Tells the Story

People living in the urban cores of large metropolitan areas comprise more than half the residents who live in counties with the highest COVID-19 prevalence.

### New York City (all boroughs)
New York City (all boroughs) accounted for 14,551 deaths, which, if considered a country, would rank 5th in the world.

### Chicago, Illinois
Chicago, Illinois - Early April, African Americans accounted for 68% of the city’s 118 deaths and 52% of the roughly 5,000 reported cases, despite accounting for only 30% of the city’s population.

### Milwaukee, Wisconsin
Milwaukee, Wisconsin - African Americans accounted for 73% of the deaths due to COVID-19 while account

Across the country, a strong relationship between the size of the African American population of a county and its COVID-19 prevalence has been noted.

Reports from Colleagues

- In one large inner-city “safety net” hospital, a colleague recounted the overwhelming majority of his patients who succumbed to COVID-19 were indeed black. These patients all had poorly controlled comorbid conditions, including chronic obstructive pulmonary disease, diabetes, asthma, cardiovascular disease, and renal disease.

- A colleague at the suburban flagship hospital of a large regional health-care system noted almost exclusively Hispanic laborers with often underdiagnosed and undertreated comorbidities as discussed above.
When is it time for change?

If the COVID-19 pandemic and its associated suffering and death does not motivate substantive change - what does that say about our society, given our aggregate wealth in this age of expanding knowledge and discovery?

The Path to Health Equity

- Discrimination/Minority Stressors
- Food Security – Access to health foods
- Stable income & Job security
- Environmental Quality
- Neighborhood Conditions
- Quality Affordable Healthcare
- Educational Opportunities
- Housing
National Plan of Universal Health Care

- Easily accessed by all citizens
- Cost is scaled to an accurate assessment of resource-based ability to pay
- Instead of coming together, as we have done in the past after major disasters, health-care reform is currently under attack as opposed to being refined to be both effective and inclusive.

Community-based Health Education

- Effective models sorely needed
- Foster enhanced health literacy in high-risk communities of individual & families with limited resources
- Partner with community partners that have established trust within at-risk populations
  - Places of worship
  - Educational institutions
  - Fraternal organizations
Where Do We Go From Here?

A Discussion Facilitated by Tonya Winders

The Road to Health Equity

As a physician: How do you routinely assess & address social determinants of health with your patients?

What can each of our listeners do to reduce disparities?
Questions?

Please record your questions in the Question box on your webinar control panel

We will address as many questions as we can

Join us on **July 9th at 4:00 PM Eastern** for the **8th webinar** in our COVID-19 Webinar Series -

**COVID-19 & Respiratory Tools: How to Access, Use and Clean Inhalers, Nebulizers & More**

Tonya Winders
Dr. Purvi Parikh
COVID-19 & Asthma: The Time for Equity in Healthcare is NOW

Thank you for listening!
Get guidelines-based information at allergyasthmanetwork.org